

**Fax**

To: Examiner Oh	From: Christina M. Doyle
Fax: 571-273-0599	Pages: 35 (including cover page)
Phone: 571-272-0599	Date: 09-Jun-2004
Re: USSN 10/060,849	CC:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Our reference: P51223/DLD

Dear Sir,

Per your request, enclosed please find a copy of the sent postcard, response, extension of time, as well as a 4 page reference.

If you should have any further questions, feel free to contact me.

Respectfully submitted,

**Christina M. Doyle
Assistant to Dara L. Dinner and Jason C. Fedon
Corporate IP
(610) 270-5851
christina.m.doyle@gsk.com**

DOCKET No. P51223 Date Mailed 13 Feb 04 Atty/Secy JD/omd

MAILING: CERTIFICATE/EXPRESS MAIL # _____

U.S. Serial No. : 10/060,849 Filing Date: 30 January 2002
Int'l App. No.: _____ Int'l Filing Date: _____

RECEIPT IS ACKNOWLEDGED FOR THE FOLLOWING:

- | | | | | |
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| <input type="checkbox"/> Appln. Trans. (+ 1 copy) for: | <input type="checkbox"/> Provisional | <input type="checkbox"/> CIP | <input type="checkbox"/> Statement to Support Filing | |
| <input type="checkbox"/> Utility/Continuation | <input type="checkbox"/> CPA | <input type="checkbox"/> RCE | <input type="checkbox"/> Divisional | <input type="checkbox"/> Copy of Notice to Comply |
| <input type="checkbox"/> Specification _____ pages | <input type="checkbox"/> Abstract _____ pgs | <input type="checkbox"/> Diskette | <input type="checkbox"/> Paper Seq. Listir. | |
| <input type="checkbox"/> Dec. & Power of Atty _____ pages () | | <input type="checkbox"/> Appeal Brief _____ pages | | |
| <input type="checkbox"/> Drawings _____ Sheet(s)/Figs _____ to _____ | | <input type="checkbox"/> Petition _____ pgs. | | |
| <input type="checkbox"/> Assignment _____ pages & Recordation Cover Sheet | | <input type="checkbox"/> Status Request | | |
| <input type="checkbox"/> Trans. Ltr Nat'l Stage Entry (3pgs.) | | <input type="checkbox"/> Trans. Nat'l Stage (2nd sub) | | |
| <input type="checkbox"/> Information Disclosure Statement | | <input type="checkbox"/> Resp. to Written Opinion | | |
| <input type="checkbox"/> Form PTO-1449 _____ pgs. & _____ References | | <input type="checkbox"/> Priority Document | | |
| <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Response <u>27</u> pages | | <input type="checkbox"/> Notice of Appeal/Brief | | |
| <input checked="" type="checkbox"/> Petition for Extension of Time plus 2 copies | | <input type="checkbox"/> Resp. to Rest. Req. _____ pgs. | | |
| <input type="checkbox"/> Issue Fee Trans. (Part B) + 1 copy | | <input type="checkbox"/> Req. to Correct Filing Recpt | | |
| <input type="checkbox"/> Copy of Notice to File Missing Parts | | <input type="checkbox"/> Copy of Filing Receipt | | |
| <input type="checkbox"/> Request for Nonpublication (1 pg) | | <input type="checkbox"/> Correct Defects _____ pages | | |
| <input checked="" type="checkbox"/> Authorization to Charge Dep. Acct. # <u>19-2570</u> | | <input checked="" type="checkbox"/> Postcard | | |
| <input checked="" type="checkbox"/> <u>Reference (4 pages)</u> | | | | |